

March 20, 2009

Los Angeles County Board of Supervisors

> Gloria Molina First District

TO:

FROM:

Each Supervisor

Mark Ridley-Thomas

Second District

John F. Schunhoff, Ph.D.

Interim Director

Zev Yaroslavsky

Third District

Don Knabe

Fourth District

SUBJECT: S1

STATUS REPORT ON KEY INDICATORS OF PROGRESS,

HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER – PROGRESS REPORT #8 (Agenda Item #S-1,

March 24, 2009)

Michael D. Antonovich Fifth District

John F. Schunhoff, Ph.D. Interim Director

Robert G. Splawn, M.D. Interim Chief Medical Officer This is to provide your Board with the bi-monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the period of February 2009.

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## **Census Trending (ADC includes Psychiatric & Newborn Patients)**

The Average Daily Census (ADC) for the month of February 2009 was 563 out of 671 licensed beds, an estimated 82% utilization rate (84% occupancy). This is an increase from an ADC of 551 for January 2009. The census for Medical/Surgical units remained the same as the prior month with an estimated 93% utilization rate (95% occupancy) for February 2009.

#### **Diversion Data**

www.dhs.lacounty.gov

ED saturation diversion averaged 52% for the month of February 2009 which is a slight decrease from the month of January 2009 which was 58%.

To improve health through leadership, service and education.

On March 10, 2009, Supervisor Antonovich inquired about the status of information regarding specialty services and physician training. DHS will provide this additional information in Progress Report #9 on April 14, 2009 along with the specialties services trending report.

If you have any questions or need additional information, please contact me or Carol Meyer, Interim Chief Network Officer at (213) 240-8370.

JFS:CM:pm 811:003

**Attachments** 

C:

www.dhs.lacounty.gov

Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors



Operational Monitoring Report Reporting Period – Feb 2009

Indicator	Definition	Data	Comments						
Indicator #1	ndicator #1 – Trends in Average Daily Census and Hospital Operations Metrics								
1a. Average Daily Census (ADC)	ADC: A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean.  Calculation: Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month.  Source of Data: Affinity	ADC  700  600  400  400  0d: 06 Jan' 01 Jun' 01 Od: 01 Jan' 06 Jun' 06 Jun' 06 Od: 08 Jan' 09  Note: Average Daily Census number reported includes Medical Center + Psych + Newborns Census.	ADC provided as background information.						

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Indicator	Definition	Data	Comments
Indicator #1	– Trends in Average Dail	y Census and Hospital Operations Metrics	
1b. Occupancy Rate LAC+USC Medical Center	Definition: A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.  Calculation: The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.  Source of Data: Affinity  Target: 95%	1. Medical Center Licensed Occupancy Rate (excluding Newborns) = Med Center Census - Newborns / 600  Med Center Census - Newborns / 600  85% 81% 977% 69% 73% 69% Nov '08  Med Center Licensed Occupancy Rate (including Newborns) Med Center Census + Newborns / 600  Med Center Census + Newborns / 600  Med Center Census + Newborns / 600  85% 81% 85% 81% 87% 87% 869% 87% 869% 869% 869% 869% 87% 869% 87% 869% 87% 869% 87% 869% 87% 869% 87% 869% 87% 869% 87% 869% 87% 87% 88% 88% 88% 88% 88% 88% 88% 88	For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.

Indicator	Definition	Data	Comments
		Healthcare Network Budgeted Occupancy     Med Center Census + Newborns + Psych Hosp Census / 671	
		Med Center Census + Newborns + Psych Hosp Census / 671	
		85% 81% 77% 73.7% 69% 65% Nov '08 Dec '08 Jan '09 Feb '09	
		Medical Center = New Facility  Healthcare Network = New Facility + Psychiatric Hospitals	

Indicator	Definition			I	Data		Comments
Indicator #2	- Emergency Department	Metric	s				
2a. Median Emergency Department Boarding Time (EDBT)	Boarding Time: Time from MD Admit time (effective date and time of pre-admit) to time the patient actually leaves the ED en route to assigned bed (effective date and time of the ED disposition).	(Li	<b>Medi</b> 6:00 - 4:48 -	an Emergency	/ Department B	Boarding Time	
Calculation: The middle value i set of individual boarding times for month arranged in increasing order. It there is an even	increasing order. If there is an even	the middle value in the et of individual oarding times for the north arranged in acreasing order. If there is an even	3:36 - 2:24 - 1:12 -				
Indicator	number of values, then the median is the			Adult	Peds	Total	
	average of the middle		□ Nov '08	4:28	2:18	4:12	
	two values.		□ Dec '08	4:58	2:17	4:33	
	Source of Data:		<b>□</b> Jan '09	5:22	2:21	4:28	
	Affinity		□ Feb '09	5:25	3:00	4:55	
	Target: Less than 7 hours.						
•							

Indicator	Definition	Data	Comments
Indicator	Definition	Median Boarding Time (Adult)*  06:00	Comments
	·	Feb data is Preliminary data	·

Indicator	Definition				Data		Comments
Indicator #2	- Emergency Departmen	nt Metric	s				 
2b. ED Wait Time	ED Wait Time: Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.  Definition: Sum of all wait time values during the monthly reporting period divided by the total number of values.  Source of Data: Affinity  Target: No target value. Lower numbers are better.	Adult patient	s	Adult 10:36 11:07 12:20 10:54 : *Excludes Psy		Total 10:30 09:36 10:41 09:25 eservation Unit, and Jai	

Indicator	Definition	Data	Comments						
Indicator #2	Indicator #2 - Emergency Department Metrics								
2c. Left Without Being Seen (LWBS)	LWBS: The total number of patients who left the ED without being seen by a physician reported as a percentage of all ED visits.	Left Without Being Seen  2000 1800 1600 1400							
*Harris Rodde Indicator	Calculation: The total number of patients who left the ED without being seen divided by the total number of ED patient visits on a monthly basis.  Source of Data: Affinity Target: No target value. Lower numbers are better.	1200 1000 800 600 400 200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							

Indicator	Definition	Data	Comments						
Indicator #2	Indicator #2 - Emergency Department Metrics								
2d. ED Diversion	ED Diversion: A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis.  Calculation: The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month.  Source of Data: ReddiNet	Diversion of ALS Units due to ED Saturation  70  60  60  49  45  42  38  34  36  2121  30  23  25  30  23  25  30  23  25  30  30  23  25  30  30  23  25  30  30  30  30  30  30  30  30  30  3	This is slightly lower than the before move diversion history which generally ranged between 50-60%.  Key points:  Diversion is for paramedic runs only; Basic Life Support ambulances still arrive.  When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".						
2e. Surge Report	·	Surge reporting suspended during move weeks. Data not available. Will provide when reinstituted.							

Indicator	Definition			Comments		
Indicator #3	– Trends for Patient Dive	ersions and Transfers & #4	l – Transfers	to Rancho Los	Amigos Metrics	<b>3</b>
Rancho Los Amigos  The volume of patients transferred to RLAH for acute hospitalization	The volume of patients	Month of February Referrals from ER:				
		Med/Surg	Acute Stroke	Total		
Hospital (RLAH)	from the Emergency Department and from	# Met transfer criteria	35	NA	-	
Transfers	Inpatient Units.	# Referred to RLAH	35	17	52	
	Data Carrea	# Transfers	26	17	43	
	Data Source: Manual record keeping.	# Denied	0	NA	-	
		# Cancelled	2	NA	-	
	Cancelled category	# Patients refused	7	NA	-	
	includes patients who's condition changed leading to higher level	Referrals from Inpatients	<u>:</u>			
	of care or discharge home.		Med/Surg	Acute Stroke	Total	
		# Met transfer criteria	26	NA	-	
		# Referred to RLAH	26	0	26	
		# Transfers	22	0	22	
		# Denied	2	NA	_	
		# Cancelled	1	NA	-	
		# Patients refused	0	NA		
		Other /Pending	1	NA		

**LAC+USC Medical Center** Operational Monitoring Report Reporting Period – Feb 2009

Indicator	Definition	Data	Comments
Indicator #5	– Harris Rodde Indicator	s	
5.	LOS:	7 — ALOS	Overall trend in ALOS
Average Length of Stay (ALOS)	The difference between discharge date and the admission date or 1 if the 2 dates are the same.  Total LOS:	6.5 6.5 6.5 6.5 6.4 5.6 5.6 5.6 5.5 5.5 5.5 5.7 5.8 5.8 5.7 5.8 5.7 5.8 5.7 5.8 5.7 5.7 5.8 5.7 5.7 5.7 5.7 5.7 5.7 5.7 5.7	for the 2-year period prior to the move reduced to a low range of 4.7 – 5.5 days in 2008. Immediately prior to the move, the ALOS increased as the lower acuity patients were
*Harris Rodde Indicator	Calculation: ALOS is the arithmetic mean calculated by dividing the Total LOS by the Total # of discharges in the monthly reporting period, rounded off to one decimal place.	4.7  4.3.5  3.5  3.5  90	transferred to other facilities. This trend may continue depending on number of transfers.
	Source of Data: Affinity Target: <5.5 days	*Preliminary data pending Auditor-Controller validation	

Indicator	Definition			Data			Comments				
Indicator #6 – F	ediatric Metrics										
6. Pediatric Bed Census and Occupancy (%)	Census: The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward.	100% - 80% - 30 60% -									
Pediatric ICU (PICU) Neonatal ICU (NICU)	Occupancy: The total number of admitted pediatric inpatients divided by the total number of	20% -				Med/Surg					
Pediatric Unit	licensed beds on that		NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Adolescent (20 Beds)					
Adolescent Unit	unit and reported as percentage.					□ Nov-08 □ Dec-08 □ Jan-09	56% 52% 52%	54% 60% 68%	50% 60% 70%	33% 40% 75%	
	Source of Data: Affinity	□ Feb-09	50%	80%	80%	85%					